

ON THE
ADVANTAGE AND APPLICABILITY
OF THE
PRONE POSITION,
IN
DISEASES AND INJURIES OF THE SPINE,
Malformations of the Chest, Hips, &c.

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PRONE POSITION.

It is now six years since I was honoured by the presentation of a MEDAL, from the SOCIETY OF ARTS, MANUFACTURES, AND COMMERCE, for the invention of a prone couch; yet, although in the transactions of the Society the claims of that invention to the attention of the profession were fully developed, I have reason to believe that from that day to this the model deposited in the rooms at the Adelphi has never been practically referred to; nor has the position, that I know of, ever been adopted by any individual but myself. I know not that this ought to be much regretted, seeing that I have in the mean time had opportunities of putting the PRONE POSITION to further proof, and that the success of my experiments has led me to devote myself very especially to the management of those diseases in which that position has been proved to be so decidedly beneficial. Armed, therefore, with six years of additional experience, during which several important cases have presented themselves to my view, I have resolved, through the medium of this respectable Society, of which I esteem it an honour to be a member, to call the attention of the profession to a POSITION which, more than any other, contributes to the relief and cure of some of the most terrible diseases, accidents, and deformities that flesh is heir to. When I first invented the simple board which I shall presently have the pleasure of showing you, I little expected to produce the important results which I have now to communicate; and, now that these results have been realized, although based upon the production of that simple board, I no longer am content to be considered as the mere inventor of a couch, it being my prouder boast that I have been the discoverer of a NEW AND MOST ADVANTAGEOUS POSITION; one which I believe to have been hitherto untried and unthought of; and one which will ultimately, in a great variety of cases, supersede its opposite, the

supine position, in which patients have hitherto most usually been laid.

As the case which first led me to the invention of the couch will exemplify almost all the uses and advantages of it, I shall beg to call your attention to that case before I proceed to show you the rude and simple apparatus which I devised for its relief.

A young gentleman, aged 16, had for two years been afflicted with diseased spine. The complaint had come upon him during a tour in Scotland; and on his return from thence, he made a stay of some months at Ilinckley, that he might be under the care of Mr. Chessher. As he was becoming worse, he at length proceeded to London, and his friends were advised by the medical gentlemen who were there consulted, to take him to the sea-side. Lodgings were taken at Seaford, where I then resided; and in November 1825 he was accidentally placed under my care, in consequence of his having been attacked with scarlet fever. He had previously been attended occasionally by a medical friend of the family residing some distance off; but having been thus called upon I was of course made acquainted with the disease under which he had so long been suffering. After his recovery from scarlet fever, I therefore frequently saw him; and so great a sufferer it has rarely been my lot to behold. He had long had an abscess discharging most profusely in the right groin. There was disease and a very large posterior curvature of the lumbar vertebrae, with which the abscess no doubt communicated. He was exceedingly emaciated, and the skin so readily gave way that every part upon which he had pressed but for a few hours had become excoriated. He had a large sore on the edge of the sacrum, another on the point of the protruded vertebrae, and another on each hip. In bed therefore, whether lying supine or on the sides, he suffered extreme torture, alleviated but for a very few hours by the administration of

the most powerful opiates. From his bed, then, he was obliged to rise ; and in doing this he daily suffered an hour of agony, which, although he bore pain with much fortitude, forced tears in torrents from his eyes. When up, he sat in a chair contrived by Mr. Chessher, with high arms, and with a strap supported by an arch of steel that came forward over his head, so that the weight of the upper part of the body might be taken off from the diseased portion of the spine. But his elbows had been wrung by leaning on the arms of the chair, and his chin was completely excoriated by the frequent use of the strap. For ease, therefore, he had recourse to his crutches, upon which he sometimes stood for two or three hours at a time ; but at last excoriation took place in each axilla ; and thus every change of position afforded him but a change of torment. Having one day witnessed his sufferings, I went away, considering whether it might not be possible to place him in some other position, which would afford him sometimes an hour or two of respite from the terrible tortures which, in addition to the disease, were evidently hurrying him to the grave. I thought of the haymakers and harvesters, and the shepherds, whom I had often seen sleeping on their faces ; and although Horace, I believe, tells us that "*malus pastor dormit supinus*," I concluded that, as it is *malus* pastor who so sleeps, I would even venture to send my young friend to sleep in the PRONE POSITION. By way of trial I threw myself at length on the sofa, but found that a regular platform gave an uneasy stretching to the body which I felt assured he would not be able to bear. After many trials, I found that a slight angle in the platform, corresponding with the bend of the hips, rendered the position extremely easy. Upon this hint I acted ; and having also contrived an easy mode of laying the patient down upon the board, it was taken to the house, and he was immediately placed upon it. In three minutes he was asleep, and continued so for three hours. When he awoke, seeing me sitting beside him, he exclaimed that he had to thank me for the sweetest sleep which he had enjoyed for many months. That night and the two or three following ones he was removed from the couch to his bed ; but afterwards resolving to try a night upon the couch, he succeeded so well, that from that day, which was the 22d of December, until he died on the 28th of the following August, he never but once left it, excepting for the purpose of that daily change which the great discharge of the abscess rendered imperatively necessary. On this account it was that I was obliged to contrive such additions to the original platform as were required to make it a permanent, instead of an occasional place of rest, and, at the same time, enable him to be moved off and on

with facility. This was effected in so simple, and yet so effectual a manner that, whether when he was lying on the couch, or when he was raised from it that his linen might be changed, and the parts affected cleaned and dressed, he never complained of the slightest degree of pain. He rested without an opiate ; amused himself during the day in reading, writing, and drawing, all which he could accomplish without the slightest movement of the body ; and, to add to our surprise, although in no other position was he able to lie, even for a few hours, without wringing, he lay in this manner for more than eight months, and had not even in any part the slightest reddening or excoriation. He recruited so much at first, in consequence of the ease and rest he was experiencing, that for a short time we had almost a hope of his ultimate recovery. Fresh abscesses however formed ; openings took place in the other groin and in the thighs ; and a violent hæmorrhage at length coming on, he expired, as he had prayed to do, on his "dear couch" as he called it, without feeling a pang, and without uttering a groan. In this, and in one other case, some inconvenience occurred from an œdematous swelling of the legs, but it never became of any serious importance. It was, however, the cause of his trying a change from the couch to his bed on one night, which was, as I stated, the only time that he attempted that change after he had made it a permanent resting-place. This was done at the request of the medical friend I have alluded to ; but the experiment caused him so much pain, and before I saw him, which was not till the next day at noon, had again so much excoriated the angle of the distorted spine, that it was never again repeated. During the last week or two he had become so weak as scarcely to bear the upright position in which he was placed for a few minutes to be washed and changed ; and I was thinking at the time of his death, of contriving to fix on the couch a corresponding board, which being brought over his back, would have allowed him to be rolled over without the slightest personal exertion. This, I think, might be easily effected ; but I have never since had a case that has required it.*

On this case I have a few observations to make. By no mode of treatment do I believe it capable of being cured at the period when it fell under my observation. But I also believe that no position in which the patient could have been placed would have afforded him so good a chance of recovery : and if the disease had not already committed

* I have since tried this experiment, and accomplished my object in a case of injury of the spine, producing paralysis ; but, unfortunately, this case was one, and the only one, in which the patient refused, or was unable to persevere in the position.

such dreadful ravages ; if the bones had not become altogether carious ; if the constitution had not been worn down by long suffering and profuse discharge, then do I almost believe that the perfect ease which the couch afforded him, the free exit that it gave to the pus, and the great freedom from motion which was so long allowed to the diseased parts, would have insured him an ultimate cure. From the observations which I made on the above case, I may with confidence assert that, in all cases of psoas abscess in which the matter is pointing or has made its way anteriorly, the PRONE POSITION is the one in which the patient ought to be laid. Indeed in the early stage of that disease, while it may be hoped that active remedial measures, such as leeches, issues, blisters, friction, &c., might be the means of preventing the formation of matter, it is clear that in no other position can the patient be so advantageously placed, as well on account of the perfect quiet that it affords, as of the extraordinary facility which it gives for the application of the various remedies. In the incipient stage of disease of the vertebral column, the prone position is still more imperatively demanded ; and in that case, as well as in inflammation or injuries of the spinal marrow, or of its investing membranes, the long-continued and most perfect quietude in which the patient may remain, is assuredly a most important recommendation. Where there is no purulent discharge to render a change of linen frequently necessary, there need be no limit to that state of quiet but what the commonest cleanliness would impose ; as the food is taken, the evacuations passed, and all the offices of life carried on without the slightest movement of the body.

A young lady whom I have recently had under my care, who had DISEASE OF THE HIP, and LATERAL DISTORTION OF THE SPINE, lay on one occasion for ten days and nights without being moved, "a consummation devoutly to be wished" as the very slightest motion occasioned her the most excruciating pain. This patient lay on the couch for more than sixteen months, and never expressed the slightest wish for any change of position. When the matter, which had formed in the joint, had opened itself externally, she was obliged once a day to be removed from the couch, that the part might be washed and the soiled linen changed ; this however was a process so easily effected, that she scarcely made any complaint about it, although, certainly, previous to the opening of the abscess, it had not been performed without much pain. This patient has quite recovered, excepting that, as the hip joint had become dislocated, the limb is of course shortened.

A case considerably analogous to this is that of a poor little girl who had abscess of the hip, and consequent dislocation, several

weeks before she was placed under my care. But she had, in addition to the above, a distressing symptom, the consequence, doubtless, of a considerable LATERAL CURVATURE OF THE SPINE. There was continual spasm of the muscles of the legs, and the left leg was drawn and had become fixed so tightly over the other that it was almost impossible to separate them. She suffered also very great pain upon the slightest degree of motion. Her father was shepherd upon a farm belonging to Davies Gilbert, Esq., the late president of the Royal Society, whose lady had requested my attendance, and who watched the progress of the case. I cannot describe the result more emphatically than she has done in a letter to a friend of mine, by whom I am permitted to extract the following passage :—"It is but a few weeks ago that the poor child's legs were contracted in the most frightful manner, and she then suffered so much pain upon the slightest motion, that when it was necessary to lift her from her bed, she was frequently thrown into convulsions ; and now, owing to Mr. Verral's treatment, so rapid a change has taken place, that last Sunday she was enabled by the help of her crutches, to walk to church, a distance of a quarter of a mile."

In the two cases I have just related, as well as in the one I am about to relate, I have not merely to boast that the patients recovered in the PRONE POSITION ; my boast is, that but for the PRONE POSITION, they would not have recovered so soon, so easily, or so perfectly ; for in the SUPINE POSITION, the only other advantageous one, they were absolutely unable to lie. The following history, which is that of the second patient whom I placed upon the couch, will exemplify the difficulty and the mischief of attempting to force these patients to lie in the usual manner.—Ann Martin, a poor girl, aged fifteen, had a very considerable posterior curvature of the dorsal vertebræ. The legs were partly paralyzed, or I should perhaps rather say—rendered useless by contraction, which had drawn the one across the other very firmly, and had rendered her incapable of straightening the knees. I directed her to lie on a mattress in the SUPINE POSITION ; but the attempt gave her great pain, both in the back and legs, and produced violent cramp, which still more firmly drew up the legs, and fixed them more tightly across. The consequence was that at night, when the superintendence of the mother necessarily ceased, she always got on her side, and lay coiled up in the worst possible position. Upon this I resolved to place her on the PRONE couch, and upon that she was able to lie with perfect ease ; the legs soon became relaxed and capable of the wonted voluntary motions ; the back gradually became straight, and after a few months she was dismissed well. The termination of

this case was not so favourable as I could have wished. The girl went to service, probably too soon, probably in too laborious a situation. In three years she again applied to me; the spine had given way, and a large abscess had formed in the neighbourhood, which, however, I hoped, was not connected with a diseased state of the vertebræ. The result proved my opinion to be correct. I placed her again upon the couch, and opened the abscess. She seemed to be going on well, when, by one of those changes so frequently occurring, in rural districts especially, so derogatory to the profession and detrimental to the poor patients themselves, the attendance of the paupers of that parish passed out of my hands into those of another medical person, who, in utter ignorance of my plans and of my motives, in utter ignorance of the former history of the case, abruptly dismissed the couch, placed her in bed, in which I heard also she was allowed to lie pretty much as she liked; and though she ultimately recovered her health, she was left with a considerable degree of deformity.

But amongst the greatest triumphs of the PRONE POSITION I must call your attention to two cases, which are at present under my care. The first is that of a poor little girl, aged about four years, the child of parents in the lowest state of poverty; the father having for many years laboured under a painful and apparently incurable disease, though he had become the progenitor of nearly a dozen children. I mention this, to account in some measure for that negligence on the part of the parents, which allowed a disease of so much importance to proceed so far, without having consulted any medical person on the subject. When I saw the child I found a posterior curvature of the dorsal vertebræ, terminating upwards in an acute angle, from whence the cervical vertebræ advanced suddenly forwards, so that the neck seemed to be completely buried and lost, and the head to rest absolutely on the shoulders. There was paralysis of the lower extremities, excessive emaciation, a tense and tumid abdomen, great contraction of the chest, cough, dyspnoea, palpitation of the heart, depraved appetite, extreme debility, and fever, apparently of a hectic character. This child was placed upon the couch about a year since, and a very considerable improvement was speedily perceived, not only in the shape of the spinal column, but also in her general health; which improvement has progressively advanced up to the present time, although the want of sound and sufficient nutriment, as well as of care and cleanliness, evils incidental to the poverty and the large young family of the parents, have rendered this one of the most unfavourable cases I have ever had to attend to. My other patient was more fortunate; for though the daughter also of poor parents,

she resided in the vicinity of Firlie Place, the seat of Lord Gage, to whom, and to Lady Gage, the child has been indebted for the nourishment which at one time was considered indispensably necessary for her support. This case I did not see until it had existed a very long time; nor until it had advanced so far as to be incapable of a perfect cure. There had been disease of the bodies of several of the lumbar and dorsal vertebræ; abscess had formed; matter, together with portions of bone, had made its way out at the groins, and through two or three openings in each of the thighs. She had been long under the care of the parish surgeon, who, apparently despairing of the case, had not recently thought it necessary to pursue any particular medical treatment. In spite, however, of all these unfavourable circumstances, her parents had fancied that about two or three weeks before I saw her an evident change for the better had taken place in her health; in which they were probably not deceived, as ankylosis had begun to take place amongst the diseased bones, indicating, as I conceive, the existence of more healthy action. The distortion, however, still continued to increase; and, to use the expression of her mother, she grew shorter and shorter every day. I found her creeping about, though with much difficulty supported upon one crutch, and that a great deal too short. She was exceedingly emaciated; the body was bowed forward so as to approach to a semicircle;—the countenance had assumed the appearance of old age; and she was not, at eleven years of age, equal in height to many a child of five or six. On examination, I found an immense protuberance on the middle of the back, forming at its apex a very acute angle, at least four inches without the natural line of the spinal column. In consequence, however, of the bowing forward of the head and shoulders the whole spine seemed to be one vast lump of distortion, with this angular protuberance growing out of its centre, like the bump on the back of a camel. There was also considerable lateral distortion, the consequence, probably, in great part, of her being allowed to depend upon a single crutch; and the ribs had been drawn back by the distorted spine, and were involved in, or indeed formed part of, the general deformity behind, while in front they, and even the sternum, were so sunk in, that they were almost buried from the view. This child was placed in the PRONE POSITION on the 28th of March, 1835, and from it she never has been moved, excepting that for the last two months I have permitted her to stand sometimes for an hour, supported by two crutches so long that her feet can but just touch the ground. The progress of emendation has been very satisfactory. The discharge soon abated, and has long since entirely ceased. The wounds are completely healed. The health

has greatly improved. At the end of three months she had increased in height above an inch, and she is now more than two inches taller than when she first assumed the position. The lateral curvature speedily disappeared altogether; and the spine, which, as I have said, was at first bent like a bow, began soon to approach to a straighter form. To facilitate this process, I was enabled, at the end of about three months, to place a sloping board upon the upper part of the couch, which, by raising the shoulders and neck, has fully answered my expectations. The natural hollowing of the back is even considerably restored both above and below the tumour, and the tumour itself is also much diminished in size, although it cannot, I conceive, be possible to obliterate the angular protuberance produced by the ankylosed bones. The little girl, however, can now stand perfectly upright; the distortion of the chest is almost completely remedied, the general health is become perfectly good, and the countenance has assumed its naturally healthy and youthful character.

The use of the PRONE POSITION has, in both these patients, been attended by the most important advantages. In the first place, *they could not have lain supine*, especially the latter, in consequence of the rounded state of the back; but if they had been forced by any contrivance into that position, so sharp in both cases was the angle formed by the protruding bones, that the pressure would in a few days, perhaps in a few hours, have wrung and excoriated the parts. Against the ordinary excoriations and sloughings about the sacrum, nates, &c. so constantly occurring in the supine position in emaciated and debilitated subjects, many contrivances have, I know, been resorted to; and some of them, no doubt, with much benefit, though I believe none have been discovered that have afforded complete protection. But against the painful and ultimately destructive excoriation of these protruding angular distortions, no contrivance has been devised which must not, as regards the cure of the distortions themselves, be completely inoperative, if not positively injurious. Take the hydrostatic bed, for instance. Had the latter child been placed supinely upon it, is it not evident that the angular tumour would only have been preserved from the effects of pressure by the displacement of the water, and the formation of a bed for itself, in which to lie with ease? In like manner would the curved spine have sunk into a cavity of its own shape and size, in which case the position could have had no tendency towards the correction of the deformity, but, on the contrary, would, I think, have had somewhat of an injurious effect.

As regards the favourable operation of the position upon distortion of the spine, I have but one more observation to make.

which is, that as I do not allow the feet to rest on the foot-board, excepting, perhaps, during the hours of sleep, there is, owing to the somewhat depending state of the legs, a gradual but constantly acting strain upon the parts, tending to stretch out and straighten the distorted column, which must often prove as effectual as the more violent but less durable modes of stretching which have sometimes been resorted to. Yet is there one more advantage to which I must shortly allude, which is, the great facility that the PRONE POSITION affords us of varying the exact posture, so as to make it accommodate itself to the curative process. We cannot put compresses under the backs of our patients without the certainty of giving pain and of causing excoriation; but I have placed rolls of linen, &c., under the pubes so as to raise the sacrum; and I have, as I said above, placed an additional sloping board at the top of the common one to give a greater elevation to the head and shoulders; and my patients may always have exclaimed with Hamlet, "Let the gall'd jade wince, our withers are unwrung."

For the various contractions and distortions of the CHEST it has been usual to place the patient on the back, with the view, I presume, of taking off the pressure of the lungs, &c., against the distorted parts. In these cases, however, the PRONE POSITION is so immediately and effectually operative that it ought, I venture to assert, to be at once and universally adopted as the means of removing such imperfections. A young lady, aged about ten years, was constantly affected with most violent and alarming fits of asthma. These had been many times repeated before it was discovered that the chest was considerably distorted. Upon its being shown to me, I found it in front so strangely contracted and deformed, that I immediately advised a trial of the couch. We used in this case nothing but the simple platform with the angle; and this board being placed on the sofa, she used to lie on it for four or five hours in the day while she was learning her lessons. In a very few months she was enabled to lay it aside, the chest having become perfectly well formed, and the asthma having entirely ceased. So immediate is the remedial effect in these cases, that a young gentleman, who was formerly a pupil of mine, and who had considerable protrusion of the ribs on the right side, has had the distortion most sensibly reduced by reclining on the couch for an hour or two every day; but, as it causes him but little inconvenience, he will not take the trouble to persevere in the plan.

There is but one other case with the relation of which I shall trouble you. On Christmas day, 1828, the cook on board the *Hyperion* frigate, then lying in the harbour of Newhaven in Sussex, slipped up as he was running in front of the cooking fire; and as

he was falling forward, caught hold of a large boiler of hot water. The consequence was, that the whole of the back of the head, body, and thighs were most terribly scalded. For three days his life was despaired of; but at that time he rallied a little, so as to afford some faint hope of recovery. This favourable appearance did not last long: they could lay him in no position in which he did not press upon the excoriated parts; and wherever the pressure was, an extensive slough took place in a very few hours. The man appeared to be sinking fast, when I happened fortunately to meet Mr. Bailey, the surgeon. I mentioned my then newly tried invention, and it was agreed that I should go on board and give directions for the making of a couch. I did so, and the patient was placed upon it a few hours after. I could not but be gratified with the salutation of the poor fellow, when I visited him a few days after. He grasped my hand and exclaimed, "God bless you, Sir; you have saved my life, however." I believe he spoke the truth. In three weeks he got off from the couch, quite well.

The favourable result thus obtained authorises me to point out the PRONE POSITION as being highly advantageous in all cases of burns, scalds, or other accidents affecting the posterior parts of the body. It authorizes me also, in conjunction with some recent and fatal occurrences, to point it out as the position which ought to be resorted to, whenever the lash shall be laid on the back of a criminal, whether in our prisons, our ships, or our barrack-yards. With the question of the propriety or necessity of continuing that terrible infliction, we, in our professional capacities, have nothing to do; but it is clear that when the lash has either directly or indirectly caused the death of its victim, it has inflicted a penalty beyond that which the sentence contemplated. To lash and to lacerate is the office of the executioner—to soothe and to heal is the nobler province of the surgeon; and the assurance that the PRONE POSITION must avert the occasional danger, and greatly facilitate the cure, induces me to speak of it as a means that ought always to be resorted to.

And now, having spoken of the PRONE POSITION in those cases in which I have found it beneficial, let me ask whether it must not prove equally beneficial in many other cases? In injuries of the spine, in paralysis of the lower extremities, whether caused by accident or otherwise, must it not be eminently advantageous, not only in affording rest and ease and a ready means of applying external remedies, but also in preventing the extensive sloughings which so often occur in these cases when placed supine, and which so frequently cause or accelerate the death of the patient? If there be a necessity for the use of the ca-

theter, it could not, it is true, be well introduced in this position; but that difficulty might be obviated by the use of the double couch which I before adverted to. In carbuncle or other similar diseases attacking the back part of the body, I would also with confidence resort to the PRONE POSITION. I once saw a person who died from a very extensive carbuncle on the loins, whose life might probably have been saved had I then known or thought of the position now recommended.

In fractures of the thigh, or in those of the neck of the thigh bone, it might be eminently useful; and I have thought that in those cases, if a weight were attached to the foot, an extension might be kept up which would contribute greatly to the more perfect cure. But there is one disease, which is out of the province of surgery, in which I should be most happy to see the position tried. If a case of CONSUMPTION be susceptible of cure at all, I do conceive that nothing could more assuredly facilitate that cure than the placing the patient in the PRONE POSITION. I hope I shall not be jestingly told, that, having mounted my hobby, I am riding a free horse to death. When I reflect on the evident advantages of a horizontal posture—when I consider the impossibility there usually is of lying on the back or on one side—when I think of the cough which accompanies every movement; of the restlessness and weariness which accompany the lying in the usual positions; of the wringing and excoriations of the back or hip, upon which the patient does lie; of the necessity there is for moving to take drink and food, and even to cough and to expectorate; and when, on the other hand, I consider the perfect ease of the PRONE POSITION, the entire freedom from motion which is its great characteristic—the support it would give to the chest—the equable warmth it would keep up—the ease with which any thing may be expectorated—the improvement which it may make in the form of the walls of the cavity,—and the entire certainty that the patient will never be wrung or excoriated, nor prevented for one single hour from sleeping, in consequence of any pain from pressure; when, I say, I consider all these things, I do most decidedly think that to the PRONE POSITION we may look for an important auxiliary to any means that may be devised for the cure of this formidable disease.

I have said nothing on the subject of either the general or local treatment of the cases I have related. It may be supposed that I have some favourite opinions upon that part of the question; but these I have purposely omitted, because the posture I am advocating is consistent with all the usual modes of treating such diseases, and need not, therefore, supersede by its use the plan of treatment adopted by any gentleman

who may be disposed to try or to recommend it.

In conclusion, I beg leave to repeat my perfect conviction that the *PRONE POSITION* will enable us to cure many cases of disease which would, without it, be incapable of being perfectly cured; and that even where it cannot altogether cure, it will afford such a

chance of improvement, and such a certainty of relief, that it ought to be very generally adopted. To restore health to the diseased body, and beauty to the distorted form, are the proudest boasts of our art; and second only to these is its power of alleviating the pangs of sickness, and of smoothing the passage to the grave.

ADDITIONAL OBSERVATIONS.

JANUARY, 1837.

More than six months have passed away since I read the foregoing paper before the Westminster Medical Society, and during that period my time and attention have been especially devoted to the treatment of diseases and distortions of the spine, chest, hips, &c. Additional experience has authorized me to speak with great additional confidence of the remedial methods which I have been led to pursue, and of the infinite advantage of the *PRONE POSITION* over every other, not only in those particular cases, but in many other maladies incidental to the human frame. It is not my intention here to accumulate cases; nor can I be expected to give a detail of those whose cure cannot have been consummated in so short a space of time, however evident the benefit may be which has already been obtained from the position and its concomitant treatment. The results, however, of this additional experience, as far as they can already have been ascertained, I feel called upon to state; and if doubts should suggest themselves to the minds of any of my readers, I shall always be ready to remove them by giving an account of the cases from which those results have been deduced.

In the first place, I have many additional proofs of the ease with which my patients adapt themselves to the *PRONE POSITION*, and of the comfort, and even the pleasure, they derive from it in consequence of the facilities it affords for useful and agreeable employment. I have at present under my care more than one young lady, not only able to read, write, sew, knit, &c., but even to practise on the piano-forte while lying prone upon the couch.

Another result of which I have greatly to boast is, that the treatment that I have adopted in connection with the *PRONE POSITION* is proved to be as triumphantly successful in the lateral as it is in the posterior curvature of the spine. I have had under my care one young lady, with a lateral curvature by which the right shoulder and hip were raised at least an inch higher than the left, who has become perfectly well at the end of only four months. There are others who have already derived much benefit from the

position, although they have been employing it not more than five or six weeks; but I may particularly refer to the case of Triphina Moulton, of No. 2, Lower Gillingham-street, Vauxhall Road, because it exemplifies several of the points to which I am desirous of directing the reader's attention. This child's was the worst case of lateral curvature, combined with distortion of the ribs and irregular muscular action, that I have ever seen. In attempting to walk, the right hip was drawn up at least four inches higher than the other. In five months the protruded ribs have been nearly restored to their proper form, the spine is become comparatively almost straight, and the irregular muscular action is so considerably diminished, that in walking, the hip is not elevated more than about one inch. She is now, while lying on the couch, making use of various exercises for the purpose of still further correcting the action of the muscles; though I doubt if any irregular action will continue after the spine shall, as I trust it soon will, be restored to its natural form.

I have become convinced, from these and several other cases which have fallen under my care, that in the *PRONE POSITION* the spine and chest may be gradually, but certainly, restored to their proper form; while the violent but fashionable gymnastic exercises, although they may and do correct the irregular muscular action, and give vigour to the frame, not unfrequently fail to obtain those most important results, while, by preternaturally enlarging the muscles which they call into action, they frequently give to the delicate female form the appearance of the ploughman or the porter. I have under my charge two young ladies who have for ten or twelve months been employing the ealsthenic exercises, with advantage probably to their general health, and certainly with a great increase of muscular power, but as certainly with an aggravation, instead of a diminution, of the bony deformities. The constant strain upon the spinal column, which the *PRONE POSITION* so naturally and gently affords, together with the opportunity it gives for powerful friction, and for the use of such exercises as may give a proper play to the

muscles, at the same time that all weight is taken off from the yielding pillar itself, prove this position to be most peculiarly fitted for the cure of this class of distortions; and recollecting, as I do, the once beautiful figure of a lady, who was for three or four years a patient of the late Mr. Shaw, and contrasting it with the fixed deformity which, either in spite or in consequence of the exercises she unremittingly pursued, is now unhappily her lot, I cannot but triumphantly proclaim, that no such unfortunate result could have occurred under my method of treatment.

Another circumstance in favour of the new position, and confirmatory of my former views, is the power it possesses of speedily correcting contraction or deformity of the chest. Here again I may refer to the case of Triphina Moulton. When first placed on the couch, her chest, in front, was greatly contracted and deformed, and she had in consequence very frequent attacks of asthma, or probably of bronchitis; at the end of six months, her chest has become expanded, and all distortion removed; and she has not had a single attack of the cough, or shortness of breathing, since she came under my care. Surely such a statement, in addition to what has been said before, ought to authorize a trial of the position in cases of consumption, &c., combined, of course, with such other treatment as the medical attendant might be inclined to pursue, and to which it must assuredly afford the most important assistance.

While boasting of the more momentous advantages to be derived from the PRONE POSITION, I must not despise the testimony I have to produce of its utility in cases of protracted disease and debility, unconnected with distortion; under which circumstances the patients are accustomed, perhaps for hours in every day, to sit half double, from their inability to support themselves erect. In such cases the bowed state of the spine is immediately remedied, and by that means a future deformity in very many instances prevented; while *the very position itself*, as will presently be stated, *will most materially tend to the re-establishment of health.*

But, perhaps, the most important result of my experience in the use of the PRONE POSITION, and one which has come upon me unexpectedly and unsought for, is the discovery of the extraordinary power which it possesses, of improving the state of all the organs of digestion, and especially of correcting habitual constipation. In this position the appetite is increased, and the digestive process is carried on in unwonted perfection; the general health becomes in consequence improved, the mind is rendered contented and cheerful, the body grows and increases in plumpness, and the face recovers its natural juvenile appearance.

Here I may once more refer to my little patient, Triphina Moulton. She came under my care, feeble, thin, fretful, without appetite, complaining of head-ache and of pains in the back and limbs; and she was constantly obliged to have recourse to the use of aperients. She is now become strong, fat, cheerful; her appetite is good, she is free from pain of every description, and is never obliged to resort to the use of medicine. To this it may be added, that it produces a corresponding effect upon the action of the kidneys; and this is most especially remarkable in cases where such an effect is most particularly to be desired. A little boy, the son of Mr. Stainsby, of No. 3, Vivian Terrace, near the new Church, Chelsea, has recently been placed on the couch, in the expectation of its being able to improve some considerable distortions of the limbs, connected with general ill-health. In a few hours, an increased action of the bowels and kidneys began to take place, which continued for three or four days; and the belly, which before was very much swollen, and was exceedingly hard and tense, has now become soft and pliant, and greatly decreased in size. This case, together with some others which have occurred to me, would induce me to expect that the position might prove advantageous in many cases of dropsy.

A vague opinion seems to exist in the minds of practitioners of the present day, that posterior curvature of the spine is always connected with ankylosis, or bony union, of the bodies of some of the vertebræ, in which case it must be in some degree incurable. A case, which occurred to me a few years ago, will prove the incorrectness of this opinion. Richard Pont, aged 18, had hurt himself in attempting to lift a sack of wheat. When he consulted me, he had an immense posterior curvature, occupying the whole of the dorsal vertebræ. He was under my care for about two years, and he is now a remarkably fine young man; tall, well proportioned, and his spine as correct in its form as if it had never been misshapen. Whether it be owing to the prevalence of this erroneous opinion, or whether from a want of confidence in the remedial measures and positions usually had recourse to, I know not; but certain it is that thousands of unhappy beings are allowed to sink into cureless deformity, whose cases would admit of very considerable improvement, and probably of an effectual cure. Although I do not profess in this brief notice to dwell upon individual cases, I cannot refrain from mentioning one testimonial in favour of my plan of treatment, for which I am again indebted to Mrs. Davies Gilbert. — Downing had had some injury to the spine, and a displacement of some of the vertebræ, producing paralysis of the lower extremities. He had been suffering for two or three years, and had been ably and energetically treated by Mr. Street, a sur-

geon of Penrhyn. He had, in a considerable degree, recovered the use of his limbs, but the protrusion of the spine was unrecovered. Mrs. Enys, of Enys, writes thus to her mother, Mrs. Gilbert:—*I have been sitting to-day with Downing. He has been on his couch a fortnight, and likes it very much, and thinks himself better. Mr. Street, who saw him a few days ago, said he considered the spine to be evidently improved, even in that short space of time.*" Of producing so rapid an improvement as this, I believe no other position can boast; and when we consider the long duration of the disease, there are few, I think, suffering from similar deformities, who may not be encouraged to hope for very considerable relief, if not for a perfect cure.

Yet, even in the higher circles of society, I have met with some cases of distortion, which have been allowed to go on from bad to worse under the influence of this fatal

despondency; but amongst the poor deformed objects which the charitable Society under which I have the honour to act has called upon me to attend, many of whom are now improving in health and in shape under my care, how many are there who have been dismissed, by the surgeons they have consulted, with the discouraging assurance that nothing could be done for them! If there be any circumstances in my humble career, of which I have a right to be proud, they are, that after my new method of treatment shall have become sufficiently known, so discouraging a denial of help ought not thereafter to be given; and that my fortunate discovery of the advantages and extensive applicability of the PRONE POSITION has made me, not the founder of, but the cause of there having been founded, a Society which will carry into the homes of the diseased poor the means of correcting deformity, and the hope of restoring health.

MAY, 1838.

A year and a half of farther experience, has tended to encrease my confidence in the use of the PRONE POSITION. In the space that is here allotted to me, I cannot enter very largely into the subject, nor could I, at any rate, in an essay to be appended to the report of the proceedings of our Society, discuss the question either so fully or so minutely as I should do in a treatise, more exclusively addressed to the medical world. I shall content myself with a rapid glance at a few important cases, making only such preliminary observations as may seem to be absolutely necessary, to explain my views and my opinions. A case which was left incomplete in my former observations, leads me to begin with INJURIES OF THE SPINE. In those cases, position is nearly all in all; and if the question be closely and candidly considered, there cannot, I think, be a doubt in the mind of a single individual, of the superiority of the prone over the supine position. In the first place, as the food may be taken, and the evacuations passed, without the slightest movement of the body, it affords the patient a more perfect degree of rest than he could obtain in any other posture. In the second place, it exposes the spine more completely to the examination and treatment of the surgeon. He may cup, leech, or blister it; introduce setons or issues; may rub it or press it; in fine, if fractured and dislocated, may set it or reduce it—all which things are done with inconvenience, while many of them cannot be done at all while lying on the back. Thirdly, it affords the means of giving any extension that may be necessary. By fixing the upper part of the body on the couch, while the foot-board is

taken out, and by perhaps adding a weight, as I have frequently done, either to the feet or to the hips, the desired stretching of the column may be effected and continued without difficulty, and with little or no inconvenience to the patient. Fourthly, it prevents the chance of those excoriations and sloughings, which, in paralysis of the lower extremities, are often more fatal than the original injury itself; and fifthly, it permits any advisable degree of pressure to be made upon the injured part, a circumstance that was found so highly advantageous in the case of John Tarbox, as related in the report. *That man is become well*, and has resumed his wonted avocation as a painter. Downing, of Enys, *was also enabled to return to his agricultural labours* shortly after the publication of my first additional observations. These patients would doubtless have been cured very much more speedily, had the use of the prone position, and all the advantages to be derived from it, been fortunately known to the surgeons who attended them in the first instance.

The successful cases of Ann Bass and of Eliza Vicars, related in the Report, go far in confirmation of this statement; and I can but regret, that this treatment was not persevered in by a young lady, with a similar disease, living near Alton, in Hants, who was placed on the prone couch on the 20th of January, 1837. She had then been lying for seven months upon her back, with a large issue on each side of the spine. There was great tenderness of three of the dorsal vertebræ, one of which was slightly depressed, and the others pushed out a little from the general line. She had great derangement of the di-

gestive functions, it was therefore a case which would have derived the most immediate benefit from the use of the prone position. The very evident advantages, however, of that position, seem not to have been appreciated by the surgeon who attended her. I was requested to see her again about three months after, and found that she had made no effectual use of the couch, and that the state of her spine, and of her health, was not at all improved. My visit again was useless. Her mother, a lady residing near London, had a prejudice in favour of the great names of the profession. A surgeon of eminence was consulted, to whom my plans were unknown, and who, without seeing the case, advised a different treatment. From that time, I have never seen the patient, and I know not how she may now be, but I do know, that some months after this, she was still lying on her back in a state of little or no improvement.

On the question of ankylosis, I am still wider than ever from the general opinion. Of its necessity, where there has been caries of the bodies of the bones, I have no doubt, but in three cases out of four of posterior curvature, you have no abscess, and therefore I should say, no caries. More than half of these cases are not caused, as I think may be satisfactorily proved, by disease of the bone itself; many of them, probably, not caused by absolute disease of any of the parts. Take the case of Richard Pont slightly mentioned in the foregoing observations. A violent sprain of the ligaments, by attempting to lift a too heavy weight, occasioned a bending forward of the spine, which the hard labour of a farmer's servant continually increased. A large tumor was formed, which at length weakened his powers, but which had never been very tender or very painful. Here there was sprain, and consequent relaxation of the ligaments—the bones bowed forward—the intervertebral substance was either absorbed by pressure, or pushed backwards, so as to become thicker behind, as it became thinner in front. In a short time the edges of the bones must have been brought into contact, and then would have come on inflammation and ankylosis; perhaps caries and subsequent abscess. These evils were fortunately prevented, and the cure was perfect. Then there may be disease of the intervertebral substance, as I believe there frequently is, without disease of the bones. It is softened, absolved, or destroyed, and the bones at length touching, the usual choice of evils is all that is left to the unfortunate sufferer. The opinion, indeed, that there cannot be posterior curvature, without ankylosis, and that too is a very general opinion, is most absolutely incorrect, for you must of necessity have the curvature before you can have the ankylosis. I am not rebutting this opinion, merely for the sake of argument, I combat it because I believe it to have been

fatal to the forms of thousands, and to the lives of thousands more. Posterior curvature, in its early stages, may frequently be completely cured by the continued use of a proper position, combined with a judicious medical and dietetical treatment. And even where ankylosis has taken place, it will be seen by the Society's Report, how much may still be done by proper management, for the improvement, if not for the cure of the patient.

John Tarran, aged two years, placed on the couch on the 9th of August, 1837. Considerable rounded curvature, with a slight angle of the dorsal vertebræ. Was ill with chicken-pox about ten months ago, the curvature was perceived soon after that. It has continued to increase, and has at length produced almost perfect paralysis of the legs. He cannot walk nor stand, nor can he even crawl about, though he was able to do that a year ago. He is very thin, sickly looking, and has habitual diarrhœa. Medicines were given to correct the state of the bowels, and to strengthen the system, and he was enjoined a very constant use of the couch.—August 25th. He has been on the couch night and day, and though so young, is kept to it with considerable facility. He looks better, and sleeps more soundly than he used to do on his bed. Friction employed, and a slight degree of pressure applied over the curved portion of the spine.—November the 23d. Much improved, the appetite better, the body fatter, and the countenance more healthy. The back nearly straight. He has recovered the use of his legs, can crawl about sturdily, and when sitting, though that is still forbidden, *can* support himself upright.—March the 7th. The improvement still continues, although a short time ago he had a violent return of diarrhœa, and was therefore obliged to resume his medicine. This case is still progressing favourably. Can there be any doubt, that this boy, but for the use of the position, would have soon had the bodies of one or two of the vertebræ brought into contact, which would probably have inflamed and then have united; and the disease and debility still continuing, bone after bone would have sank down, suppuration would in some part have taken place, followed by caries of the bones, by abscess, probably by death, and if not, certainly by frightful and incurable deformity. Such is the history of half a hundred cases, about which I have been consulted during the last two years. It will perhaps be said, that the supine position would have done as much for this boy as the prone position, but how would a child of two years old have been kept for months lying flat on his back? Had there been no other cause for preference, this alone would have been sufficient. But there are many other causes, and especially this, that the supine position is unfavourable, while the prone is favourable to the digestive system, and to the circulation

with loss of appetite, diarrhœa, and emaciation, would probably have died under the attempt to enforce the former position. I could narrate several cases very similar to the above, but it would only needlessly be repeating the same descriptions; but I have two cases of recent date, which show so pointedly the immediate benefit which the position is capable of conferring, that I cannot refrain from giving them.

George Whiting, placed on the couch, February 19th, 1838. Very large and increasing curvature of the dorsal vertebræ. He had a fall nearly three years ago, and has ever since felt great pain and weakness in the spine, but no protrusion was perceived until May, 1837. The legs much contracted and partly paralyzed. He suffers great and continual pain, especially when in bed at night. He cannot lie on the back. The bowels relaxed, and the evacuations very offensive.—March 5th. He lies well on the couch, on which he feels much relief, but he still suffers much pain when moved from it.—April 8th. Much better in every respect. Is become cheerful; the bowels regular; the appetite good; the strength increased. The legs are less contracted, and the curve of the spine certainly somewhat diminished.

William Simpson, aged six, placed Feb. 22d.—Enormous curvature of the dorsal and cervical vertebræ. Had measles two years ago, soon after which the spine began to curve. About sixteen months since he had a fall, and since that the distortion has very rapidly increased, and is still daily increasing. The lower extremities are paralyzed. The urine is passed involuntarily. The legs are drawn up, and permanently bent; the feet, and even the toes, distorted and contracted. Frequent spasms occur, adding daily to the contractions, and causing excruciating pain. Violent rigors also come on several times in the day, during which, he screams out from the intensity of his sufferings. He has some diarrhœa attended with continual tenesmus. He is much emaciated; has hectic flushes, and has frequent retchings and vomitings.—March 7th. Less pain, less diarrhœa; the tenesmus much relieved. The legs less contracted; he can move them a little, and has more control over the action of the bladder.—April 12th. Still improved, and the pain, as well as the spasms, very greatly diminished.

In addition to these, and many other cases of actual disease of the spine, it has fallen in my way to see several cases in which disease of the spine has erroneously been supposed to exist. Many of these patients had been most unnecessarily tormented with issues, setons, &c. and that perhaps in mere lateral curvature, where the pains and the tenderness are rarely occasioned by actual disease of the bones. In the following case, no such treatment was adopted by the gentleman who first attended it, but it was certainly one in which it would

have been adopted by many practitioners, so prevalent are the prejudices in favour of a practice which I believe has done much more harm than good, and which certainly ought never to be employed in lateral curvature. Miss E. V., aged twenty-one, had been long suffering from great pain in the back, accompanied by exquisite tenderness. Pain also in the limbs and in the chest, together with constant, and sometimes most distressing shortness of breath, and an utter inability of walking, and almost of moving from her bed. The digestive, and indeed all the functions were very imperfectly performed. On examination, I found a lateral curvature between the shoulders, and a considerable enlargement of the ribs on the right side. The tenderness was very great, but it struck me that it was too diffused, and perhaps too acute to be attributed to diseased bone. She began the use of the couch on the 24th of January, 1837, but owing to the extraordinary pain that she suffered, was able at first to lie on it but for a short time—not above three or four hours in the day. Gradually, however, increasing the time, she was able, at the end of about three months, to continue upon it night and day. Previous to this a circumstance occurred, which entirely confirmed my opinion that there was no disease of the bones. The tenderness which had so long been felt in the course of the spine, became somewhat relieved, and at the same time attacked the whole edge of the scapula, which became so acutely sensible that the slightest touch occasioned severe torture. She persevered, and still perseveres, in the position, though she was very long before she could bear the various actions, extensions, &c., which were required for the more rapid improvement of her form. The appetite, however, soon improved, and all the functions were speedily restored to a healthy state. She is now as nearly as possible well, every complaint being gone excepting a little remaining debility, and perhaps still a very slight enlargement of the shoulder, which, however, is rapidly subsiding.

I was consulted a few weeks since by a lady of rank, who had been recommended to try the prone position, and who had indeed been supplied a few months before, by a surgeon who then attended her, with a couch, which, while it pretended to be mine, was in every respect unlike it; a circumstance, the more unpardonable, because I had once caused a couch to be made for that gentleman, that he might try it on a hospital patient that was under his care. This lady has suffered for many years, from a complaint which has not apparently been well understood. There was great derangement of the digestive organs, accompanied by spasms and intense pain. But she has also long complained of great pain, and extreme tenderness in parts of the spinal column, and of a distressing sense of

dislocation. I found, on examination, that two of the lumbar vertebræ had become in the very slightest degree more prominent than the others, the effect, no doubt, of a relaxation of the ligaments, occasioned, in part, by great and long-continued debility, and in part, by the half-sitting and half-lying position to which she had long been accustomed both on her sofa and on her bed. I found, also, an extreme tenderness of some parts of the spine, but I felt assured, as do indeed the physicians who at present attend her, that it was not the tenderness of disease of the bones, which I fully believe she has never had, although she has, by some of the medical persons whom she has consulted, been treated, I may say tormented, for it, especially by repeated burnings with moxa. I am much tempted to hope, that a perseverance in the prone position may, in this case, be productive of benefits similar to those which resulted from its use in the last-mentioned patient.

In the treatment of lateral curvature I continue to find the position most eminently useful. It enables me to keep up a continued extension of the spine, and to increase that extension by weights to any amount that may be wished. It enables me also to depress the elevated ribs and shoulder, and to elevate and stretch out those parts which are in a corresponding state of depression; to bring into action those muscles which have become deficient in power, while those which are predominant are kept in a state of comparative rest; it contributes most essentially to expand the chest, and to correct those irregularities in its form which are usually attendant upon distortion of the spine; finally, it enables me, by the application of the most simple methods, to cure patients who have been in vain subjected to more violent and more irksome modes of treatment, and it affords me the means of conferring a great degree of improvement and relief in cases where the age of the patient and the extent of the curvature forbid the hope of a perfect cure.

Miss C. P., a young lady, aged 16, had been for ten months employing a variety of exercises, under the direction of a surgeon who largely employs that method of treatment. She had been especially using the hand swing and heavy dumb bells, but was, notwithstanding, gradually becoming worse. The dumb bells I absolutely forbade at once, the swing I allowed her to continue under some modifications. She had, when she first came under my care, some enlargement of the right shoulder, together with a slight sigmoid flexure of the spine. As the case was not a very bad one, I allowed her to take much exercise in the air; but within doors the use of the couch was enjoined as a constant substitute for the sofa or the chair. In all other respects the usual treatment was adopted, and in four months I had the

satisfaction of pronouncing her perfectly well.

Miss M., aged 19, had been, when I saw her, in November, 1836, under the direction of a surgeon of great eminence, who had ordered the use of the reclining-board, as it is called, a thing which, in LATERAL CURVATURE, *must be almost powerless*. I speak this most advisedly, after having examined it in all its bearings; and with a thorough conviction of the correctness of my opinion, I repeat that the lying supine upon the reclining board in lateral curvature of the spine can possess but little power of contributing towards a cure. In addition to the board, she was also enjoined to practice some modes of exercise, and to make use of heavy dumb bells. She got, however, worse and worse, and when she was placed under my care she had a very considerable curvature both towards the right shoulder and the left loin. There was also a very great enlargement of the right shoulder, while the left was very much depressed. The adoption of my plan of treatment was attended with immediate benefit; and although the age of the patient was not so favourable as it would have been a few years earlier for the rapid yielding of the parts, she has become, at the end of seventeen months, as nearly as possible well. This improvement in her form has also been accompanied by a great improvement in her general health, which, before she began the use of the couch, was very far from good.

Miss V., a young lady of the same age as the above, has to congratulate herself upon a more speedy cure. She had been, for fourteen months, pursuing the gymnastic treatment, climbing, and jumping, and swinging from day to day, but without any good effect. When she began the exercises her spine was an inch out of the perpendicular line at the right shoulder; when she abandoned them it was out an inch and a half. In one month we regained the lost half inch, and in six months she was so well as entirely to dispense with my attendance.

Master James F. had, from his earliest infancy, a distorted state of the spine. When I saw him he was about six years of age, and he was then wearing, without any good effect, some kind of steel stays. The spine was at that time in a most extraordinary state. The cervical and the upper dorsal vertebræ were curved laterally, first to the right, then to the left, and then to the right again. Below this there was a considerable rounded posterior curve, buried almost beneath a large fleshy tumour, that entirely prevented me from feeling some of the protruding spinous processes; added to this, there was great contraction of the chest, shortness of breath, cough, and general debility. In a few months we got rid of every appearance of lateral curvature. The chest is beautifully expanded, the health completely restored, and the posterior curvature very

considerably lessened; while, by the stretching and pressure which has been employed, the fleshy tumour is also much diminished; and this change has been effected while he has been at a boarding school, cheerfully, upon his couch, pursuing with his little comrades all the accustomed studies.

But it is useless to accumulate cases. I have under my care several very formidable ones, all of which are improving most evidently. I shall conclude by slightly noticing the cases of Miss L., aged 14, and her brother, aged 11. They had both, for more than two years, been pursuing a peculiar mode of treatment, which not proving successful, had led the gentleman who attended them to try the use of some very powerful steel stays. These they wore for about five months without advantage as to the deformity, and with injury to their health. In Master L. especially, they had brought on a very great contraction of the chest, the consequence of which was great difficulty of breathing, with a suffused and dark appearance of the face. They have been under my charge for about seven months, and are in every respect much improved. I may say that the chest of Master L. is completely expanded, and all the consequent symptoms entirely removed.

Of disease of the hip I have said nothing here, because the far greater number of cases that I have had an opportunity of attending have been amongst the patients of the Society, and several of them have found a place in the Report. I must, however, repeat my opinion of the great usefulness of the PRONE POSITION in these cases, and I will but shortly mention, in illustration of my opinion, the melancholy termination of my endeavours to serve a poor boy of the name of James Vincent, whom I found suffering under abscess connected with the hip joint, and complaining of constant and severe pain. The limb was becoming greatly contracted, and it was with difficulty I could extend it so as to place him upon the couch. I succeeded, however, in effecting this, not, I own, without inflicting upon the poor child some considerable pain.

But I knew the immense importance of the object I had in view, and I endeavoured to impress upon the mother the same sense of its importance. A few days of perseverance would, I feel assured, have got over the difficulty as it has done with others, (with William Brazier and Mary Ann Bradley, for instance,) and would have enabled him to have lain on the couch with ease, and to have recovered, if he is to recover, with an extended limb. The mother however, gave way; the couch was neglected, and an interval of a few days, during which I was prevented from seeing him by a visit I was compelled to make into the country, was sufficient to complete the contraction of the thigh, which is now permanently bent and drawn upwards, the knee being forcibly pressed against the chest.

Of the utility of the prone couch in cases which are out of the reach of cure, I must give one instance, although I have extended these observations far beyond my intended limits. A lady, aged about 50, had had, from her early youth, a very considerable distortion of the spine. For thirty years she had ceased to make any attempt to improve it; she continued during a great part of that time in tolerable health, and submitted with cheerfulness to the deformity. About four years since, however, she had a severe fit of illness, and weakened by that, the distortion again began to give way, and with it there came on a considerable difficulty of breathing, the consequence of her head being pushed forward upon the chest by the position in which she lay in her bed or on her sofa. Her head and shoulders were always much raised, as she could not lie flat upon her back. Her carriage, as she could not sit, had long become useless to her, and she had been obliged to give up all correspondence, as she could not write even a short note without great difficulty. She has, for some months, been making use of the prone couch, on which she lies for some hours in the day, on which she reads and writes with much ease, and which will, I trust, bring her back to the point from whence she started four years ago.

In consequence of the number of patients Mr. VERRAL has to attend, both in London and the country, he is compelled to limit his regular hours of attendance at No. 10, Lowther Arcade, to the mornings of Tuesdays and Saturdays. Mr. VERRAL will be at home there on those days, until One o'clock.

No. 3, BRUNSWICK PLACE,
WYNDHAM ROAD, CAMBERWELL,
May, 1838.

LIST OF THE PATIENTS

Admitted under the Care of the Society for the Relief of Distortions of the Spine, &c.

- Ann Elliot, Firle, Sussex.
 Triphina Moulton, 2, Gillingham-street, Vauxhall-road.
 Henry Moore.
 Henry Braham.
 Sarah Ann Knight, Eagle-court, Rochester.
 Richard Hugo, Tregony, Cornwall.
 Maria Harrison, 8, Pickering-place, Bayswater.
 Mary Ann Simms, Reading.
 Mr. Jamieson, Reading.
 Jane Gregory, Dogmersfield, Hants.
 Jane Gregory, Southampton.
 Samuel Stainsby, 3, Vivian Terrace, Chelsea.
 Adelaide White, White Hart-street, Drury-lane.
 Eliza Ann Newman, 12, Bull-yard, Fann-street, Aldersgate-street.
 T. Davies, 43, Eagle-street, Red Lion-square.
 — Downing, Enys, near Penrhyn, Cornwall.
 James Marshall, East Bourne.
 James Bowler, 53, King-street, Golden-square.
 Maria Blegborough, 9, Eaton-court, Eaton-lane, Pimlico.
 James Knight, Froxfield, Hants.
 Mary Elizabeth Hunt, 5, Meards-street, Soho.
 Henry Rowlandson, Goff-street, Gray's Inn-lane.
 Alfred Gamble, High-road, Knightsbridge.
 Mrs. Drew, Drury-lane.
 Sarah Welford, 31, Eagle-street, Red Lion-square.
 Cordelia Mills, Westminster Asylum, Ship-court, York-street.
 Mary Ann Heness, 22, Eagle-street, Red Lion-square.
 Alexander Lundie, 24, St. George's-row, over the wooden bridge, Chelsea.
 Sarah Ann Mills, 21, Westmoreland-row, Walworth.
 Eliza Bainbridge, High-house, Boyd's Garden's, Chelsea.
 Rachel Chandler, Reading.
 Lavinia Downing, 71, Cadogan-place.
 Eliza Ladson, 14, Prospect-place, Liverpool-road, Islington.
 Jane Hollabone, Hillingdon, Sussex.
 Emma Weeks, 33, Cowper-street, City-road.
 Mary Horton, 8, Charlotte-street, Westminster.
 Eliza Kingsford, near Fredville, Kent.
 Martha Keen, 14, Sussex-street.
 Charles Courtony, 2, Diamond-point, East India-road.
 Julia Smith, 17, Stepney Church-yard.
 George Biffen, 2, Duncombe-place, Leicester-square.
 Charlotte Brown, 16, Little Russel-street, Bloomsbury.
 George Smith, 14, Queen-street, Oxford-street.
 Sarah Cooper, 2, Pitt-place, Drury-lane.
 Alfred Lipcombe, 7, Red Lion-street, Borough.
 Mary Ropshaw, 8, Charlotte-street, North-street, Sloane-street.
 Rd. Bowen, 4, Charles-street, Westminster.
 Robert Toll, Montpelier Tavern, Walworth.
 Dinah Putland, Willingdon.
 John Carley.
 John Wickenden, near Frant.
 Richard Keeble.
 George Smallman.
 Sophia Deighton, Hastings.
 Stephen Boughton, do.
 Charles Hopkins, Buttolph Claydon, Bucks.
 William Hamp, do. do.
 John Tarbox, 3, Checkers-sq., Bunhill-row.
 Thomas Turner, Royal Horse Guards, Knightsbridge.
 Ann Bass, 12, Bleeding-heart-yard, Hatton Garden.
 Jane Thomas, 42, Lower George-street, Chelsea.
 Mary Jane Wilson, 7, Sidney-place, Portland-place, Clapham-road.
 Eliza Falconer, 1, Crown-street, Soho.
 Sarah Monk, 11½, Market-street, Borough.
 Mrs. Wilson, 1, Crown-street, Soho.
 John Tarrant, 38, Great Ormond-yard, Queen-square.
 Sarah Moorhouse, 43, Church-street, Mile-End, New Town.
 Eliza Denyer, Layton, Essex.
 Emma Bishop, 24, John-street, Liverpool-road, Islington.
 Sarah Luck, East India-road.
 Samuel Lewis.
 John Marsh, Corhampton, Hants.
 Ann Marsh, do. do.
 Jane Oakey, 44, Upper Edmund-street, King's-cross.
 Mr. Cooper, Nettlebed, Oxfordshire.
 Mary Anne Bradley, 11, Albion-place, Walworth-road.

Henry Long, Soburton, Hants.
 Eliza Jones, 5, Little Russel-street, Blooms-
 bury.
 Charlotte Bunday, 35, Nightingale-street,
 Lisson-grove.
 Frances Bunday, do. do.
 Eliza Cooper, 9, Upper Gardiner-street,
 Vauxhall-road.
 Ann Spinks, 9, King's-street, Friars'-street.
 Blackfriars'-road.
 George Whiting, 3, Latham-place, Church-
 way, New-road, opposite St. Pancras
 Church.
 William Simpson, 28, James-street, East
 India-road.
 William Burnard, 10, Theobald's-road.
 James Vincent, 39, Nightingale-street.
 William Baker, Framfield Work-house.
 Jane Nurse, Bedford.
 Charlotte Crabbe, 6, Shaftesbury-street,
 Shepherdess-Fields.
 Sarah Wood, Pollen-street, Hanover-square.
 Jane Brice, Wells, Somersetshire.
 Eliza Clark, Sheepy, Warwickshire.
 Thomas Wild, 1, Crown-street.
 David Simmonds, Beechwood, near Lewes.
 Catherine Donhue, 4, Sussex-place, Vine-
 street, York-road, Lambeth.
 Amelia Goatley.
 William Ingle.
 Martha Eldridge, Ash, near Midhurst.
 Eliza Wright, Great Illford.
 Edward Porter, do.

Henry Porter, Great Illford.
 John Cascy, 1, Ann-street, York-road.
 John Carter, Coggeshall, Essex.
 Harriet Stowers, Feering, do.
 Wm. Brazier, 8, All-Saints'-street, Hastings.
 Mary Ann Highken, Barrack-ground, do.
 Mary Banks, Hastings.
 Charles Cohen, do.
 Eliza Cohen, do.
 Mary Cox, Infant School, Seven Oaks.
 Emily Hoare, do. do.
 Mary Ann Eden, 53, King-street, Seven
 Dials.
 Eliza Vicars, 3, Sanders-court, Great Peter's-
 street, Westminster.
 Matilda Beafit.
 William T. Picket.
 Matilda Moulds, Droxford, Hants.
 Maria Quennell, 26, Trafalgar-place, Lock's
 fields, Walworth.
 William Squires, 26, Catharine-street, Vine-
 gar-ground, near London Lying-in Hos-
 pital.
 Arabella Sharpe, 4, Gee-street, Seymour-
 street, Somers Town.
 Eliza Walters, 9, Kingsgate-street, Holborn.
 Thomas Lucas, 66, Ossulstone-street, Somers
 Town.
 Harriet Bladon, Mount Row.
 Matthew Eglin.
 William Wadham, 2, Brewer's Green,
 Palmer's Village, Westminster.
 Mrs. Potter, Lewes.